

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>5/15/06</u>		2 Serial/Patent # <u>08/655,130</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
<input type="checkbox"/>	Filing			\$							
<input type="checkbox"/>	Amendment			\$							
<input type="checkbox"/>	Extension of Time			\$							
<input type="checkbox"/>	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition			\$ 200							
<input type="checkbox"/>	Issue			\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$							
<input type="checkbox"/>	Maintenance			\$							
<input type="checkbox"/>	Assignment			\$							
<input type="checkbox"/>	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0</td><td>6</td><td>--</td><td>0</td><td>9</td><td>1</td><td>6</td></tr></table>			0	6	--	0	9	1	6
0	6	--	0	9	1	6					
10 REASON:											
<input type="checkbox"/>	Overpayment										
<input type="checkbox"/>	Duplicate Payment										
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
No Fee Due											
11 REFUND REQUESTED BY: <u>Mark Polak</u>											
TYPED/PRINTED NAME: <u>Mark Polak</u>		TITLE: <u>Legal Advisor</u>									
SIGNATURE: <u>[Signature]</u>		PHONE: <u>2-7709</u>									
OFFICE: <u>CPA</u>											
*****											
THIS SPACE RESERVED FOR FINANCE USE ONLY:											
APPROVED: <u>[Signature]</u>		DATE: <u>5/16/06</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:



PATENT  
Customer No. 22,852  
Attorney Docket No. 06502.0435

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: )  
Bruce Tognazzini ) Confirmation No.: 8272  
Application No.: 08/655,136 ) Group Art Unit: 3621  
Filed: May 30, 1996 ) Examiner: Calvin L. Hewitt II  
For: CATALOG PHONE SALES )  
TERMINAL )

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**PRE-GRANT APPLICATION FOR PATENT TERM ADJUSTMENT**

In accordance with 37 C.F.R. § 1.705(b), Applicant hereby applies for patent term adjustment under 35 U.S.C. § 154(b) of 1188 days, to bring the total patent term extension up to 1569 days. This application is being filed with the issue fee payment, as required by 37 C.F.R. § 1.705(b).

**I. Statement of the Facts Involved**

**A. Correct Patent Term Extension**

Applicant received the Determination of Patent Term Adjustment with the Notice of Allowance and Fee(s) Due mailed from the Patent and Trademark Office (PTO) on October 12, 2005, stating that this application is entitled to 381 days of patent term

01/03/2006 MBEYENE2 00000002 08655136

02 FC:1455 200.00 DP

Adjustment date: 05/16/2006 CKHLOK

01/03/2006 MBEYENE2 00000002 08655136

01 FC:1501 -1400.00 DP

Repln. Ref: 05/16/2006 CKHLOK 0010390700

DAH:060916 Name/Number:08655136

FC: 9204 \$1400.00 CR

time. Thus, Applicant does not believe that any reduction of the period of delay is necessary under 37 C.F.R. § 1.701(d). Accordingly, the period of delay associated with the second successful appeal is 381 days (i.e., the period from June 15, 2004 to June 30, 2005).

***Correct Patent Term Extension***

For the foregoing reasons, the total patent term extension based on delay is 1,188 days for the first successful appeal and 381 days for the second successful appeal, resulting in a total patent term extension of 1,569. This term of extension does not exceed 1825 days, or five years. 37 C.F.R. § 1.701(b). Because the PTO calculated an extension of just 381 days, Applicant respectfully requests that the current patent term extension be reconsidered and corrected.

**B. Terminal Disclaimer**

The above-identified application is not subject to a Terminal Disclaimer.

**II. Fee**

As required by 37 C.F.R. § 1.705(b)(1), this application is accompanied by a check for \$200.00 to cover the required fee. Please charge any deficiencies to our Deposit Account No. 06-0916. If there are any other fees due in connection with the filing of this request, please charge them to our Deposit Account No. 06-0916.